

SCUTTLEBUTT

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Hospital Caregiver Team ... Ready,

Willing,
and Able



"Caring for those who care". Naval Hospital Caregiver Team pauses for a moment of relaxation as they pose for group photo. See story on pages 4 and 5.

CMC Corner

It's hard to believe that 2011 has come and gone and here we are already into 2012. As you celebrated the coming of the New Year, many spoke of "resolutions" and "self promises". All too often however, our plans are derailed by the realities of life and the realization that some goals are more difficult to achieve than initially imagined. Make 2012 the year that you see your plans through. You can do it if you set realistic goals, document milestones and utilize your resources.

As you are setting your goals and documenting milestones, don't forget to tap into the one resource that many people over look: each other. Our hospital is filled with a diverse group of outstanding and dedicated staff who have all faced different obstacles in their life. There is so much we can learn from each other and it would be a shame to let this valuable resource go to waste. 2011 was a year of great success for Naval Hospital Camp Lejeune. As a team, we accomplished so much and we witnessed a lot of individual success in career progressions, physical fitness and increased education just to name a few. So as you are setting your goals, utilize this resource to help in your planning. Remember people are successful because they surround themselves with successful people. This is what mentorship is all about.

I am extremely proud to be serving as your Command Master Chief and I look forward to watching your personal and professional success in 2012.

Military Retiree Health Care Town Hall Meeting Dates for 2012

Navy Capt. Daniel Zinder, commanding officer Naval Hospital Camp Lejeune, will host the quarterly Military Retiree Health Care Town Hall meetings, March 15 and June 21 at 6 p.m. in room 217 at Building 65 located on Molly Pitcher Drive. This will also be a chance for military members, military retirees and their family members to get updates, ask questions and express concerns about health care issues. For more information, call Raymond Applewhite at 450-4463.

Naval Hospital Holiday Pharmacy Hours

The Naval Hospital (NHCL) Pharmacy is pleased to provide services to our beneficiaries. The holiday hours of operation are listed below. The MCX Pharmacy will be **CLOSED** for renovation January 1-12, 2012. During this time your prescriptions can be filled at the NHCL pharmacy.

Jan 1-2	CLOSED
Jan 3-6	8 a.m. – 8 p.m.
Jan 7	9 a.m. – 5 p.m.
Jan 8	Noon – 4 p.m.
Jan 9-13	8 a.m. – 8 p.m.



Senior Chief Hospital Corpsman Timothy Hanley (FMF/SW/AW) Interim Command Master Chief, Naval Hospital Camp Lejeune

scuttlebutt

n.

1. *Slang for spoken communication; through the grapevine*
2. *Nautical*
 - a. A drinking fountain on a ship; gathering place
 - b. A forum for NHCL staff to get 'insider info'

SCUTTLEBUTT



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Scuttlebutt is an authorized publication for Marines, Sailors, retirees and family members. Its contents do not necessarily reflect the official views of the U.S. government, the DoD, or the Naval Hospital Camp Lejeune Public Affairs Office.

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www.facebook.com/nhclejeune

NHCL Enhances Training for Duke University Nursing Students

A Partnership that Works!

By Raymond Applewhite
NHCL Public Affairs Officer

Nursing students from one of the top academic schools in the nation, Duke University, at Chapel Hill, N.C. receive world class training alongside combat trained Navy nurses at Naval Hospital Camp Lejeune.

The Student Nurse Anesthesia program is a joint venture, which first began in June of 2010 after strategic planning meetings between Duke University and Naval Hospital officials. The program is designed to train students to become an independent Certified Registered Nurse Anesthetist (CRNA's). Students are trained in epidural/spinal placement for pain management, labor and delivery and regional anesthesia for cesarean sections.

"This is an intense program and we feel privileged to train and share our knowledge with the students from a world renowned teaching institution such as Duke University. We felt it would be best to start out small and decided to begin with one student per month for six months and shortly thereafter a second student was added to the program," said Cmdr. Cary Schultz, NHCL Clinical Coordinator for the

program. According to Schultz, the program continued to grow in popularity in 2011 resulting in a current enrollment of four students per month.

No two days of training are the same. Students begin their rotation in Obstetrics to learn regional anesthesia and caring for the obstetric patient. Training in the main operating room and pain management clinic was added to the program.

"The program is awesome. It is the best clinical rotation of any of the sites I rotated through. The level of autonomy and types of cases far exceeded my expectations. The preceptors were very knowledgeable and shared their wealth of experience with us," said Mike Brown.

Brown, a native of Charlotte, North Carolina, will graduate in May 2012. He comes from a long line of nurses in his family. Brown's mother is a Pediatric nurse, his sister is a trauma nurse practitioner and he has a brother who is an emergency room nurse.

According to Schultz, in less than a year, the program has become one of the top training sites of the 18 Duke University training sites. Over the past few months the Lejeune hospital has received numerous requests by other students to come to Naval Hospital Camp Lejeune for training. The hospital Anesthesia department is staffed with 18 Anesthesiologists and Nurse Anesthetists who work side by side with the student nurses.

Leading from the Front

By HM1 (FMF) Erick Torres
NHCL Blood Donor Center



The Holiday Season is great time for family and friends, but may be a difficult time for most Blood Donor Centers around the United States. It becomes a difficult task to recruit do-

nors to meet mission requirements because most individuals are concerned with holiday traveling and time-off. Capt. Daniel J. Zinder, Naval Hospital

Camp Lejeune's commanding officer, understands how difficult this time may be and on November 16, 2011 he found time in his busy schedule to donate platelets. The ultimate responsibility for the success of the program rests with the CO and the entire staff's willingness to help meet our mission. Capt. Zinder has participated in the commands Blood Donor program several times however this was his first time donating platelets. "The staff was friendly and made the experience great because of the comfortable atmosphere," said Zinder. He plans on donating again in the future. Everyone is highly encouraged to participate as best they can.

Blue – Green Efforts to Foster Individual Resiliency and Group Cohesion

By Cmdr. Jean Fisak and Lt.Cmdr. Sean Convoy

Intense and protracted stress exposure demonstrates vulnerability to stress injury and illness (Breslau, et. al., 1999). Unit cohesion and engaged leadership have been proven to reduce vulnerability to stress injury and illness (Brailey, 2007). Early intervention for stress injury and illness decreases the risk for long term impairment (Ehlers & Clark, 2003).

In response to an unprecedented increase in military suicides in 2006, Navy and Marine Corps leaders were tasked by the Chief of Naval Operations to charter a working group of Line, Medical, and Chaplain Leaders to conceptualize, operationalize, and deploy a plan to mitigate stress at the lowest possible level across the Fleet. Over the next 4 years, this team researched and refined a large body of knowledge resulting in the Navy and Marine Corps Combat and Operational Stress Control (COSC) and Operational Stress Control (OSC) doctrine.

The COSC doctrine is premised upon the assumption that stress falls along a continuum. The *Stress Continuum* (see Figure 1) recognizes that relative degrees of stress are actually helpful and, if mindfully embraced, has the potential to foster heightened levels of resilience. We generally recognize that it is the responsibility of the military leader to foster a working environment that intentionally, purposefully, and regularly stresses their team out of the *green* and into the *yellow* so as to develop heightened levels of resilience. We also recognize that leaders who mindfully foster resilience with their team garner the secondary benefit of heightened levels of team cohesion. The Stress Continuum operationalizes how individuals respond to stress. It is generally easy to identify those individuals that are in the *green* or *red*. It is more difficult to parse out those individuals that are in the *yellow* or *orange*.

Stress Continuum			
READY (Green)	REACTING (Yellow)	INJURED (Orange)	ILL (Red)
<ul style="list-style-type: none">• Good to go• Well trained• Prepared• Fit and focused• Cohesive units & ready families	<ul style="list-style-type: none">• Distress or impairment• Mild and transient• Anxious, irritable, or sad• Behavior change	<ul style="list-style-type: none">• More severe or persistent distress or impairment• Leaves lasting memories, reactions, and expectations	<ul style="list-style-type: none">• Stress injuries that don't heal without help• Symptoms persist for >60 days, get worse, or initially get better and then return worse

Figure 1

Stress

Unit Leader Responsibility

Individual, Shipmate, Family Responsibility

Caregiver Responsibility



Exposure to certain kinds of combat, operational or occupational stress increases the relative risk for developing a stress injury (see Figure 2). Despite individual resilience and group cohesion, persistent exposure to Combat and Operational or Occupational Stress (e.g. *Life Threat, Loss, Inner Conflict* and *Wear & Tear*) increases the relative risk for developing a stress injury or illness. or Caregiver Occupational Stress Control (CgOSC) for Navy Medicine.

It is subsequent to a dramatic increase in exposure to Combat or Operational Stress that COSC doctrine established a pre-clinical assessment tool that helps leaders safely and efficiently navigate the stress

7 Cs Stress First-Aid Model



continuum called the Combat Operational Stress First Aid or Caregiver Occupational Stress First Aid (COSFA) Model (Figure 3) for Navy Medicine.

The COSFA model provides the leader with a toolbox of interventions that if used correctly has the potential to mitigate stress injury and illness. The COSFA Model capitalizes on the Navy and Marine Corps culture defined by an innate tendency to “take care of our shipmates” and to “never leave a fellow Marine behind.” COSFA teaches the leader to continuously – proactively *check* on their people and *coordinate* crisis care when indicated.

When faced with a potentially dangerous situation, COSFA guides the

leader to *cover* and *calm* the individual in crisis. As the immediate crisis subsides, COSFA challenges leaders to *connect* the identified individual in crisis with a healthy – readily available support system. Once connected, leaders work to reestablish *competence* by fostering a slow progressive return to their duties. The product of *connecting* and *competence* results in increased *confidence*. Employment of COSFA has the potential to take members at risk for a stress injury, driving them out of the *orange* back into the *yellow* and *green*. COSFA is a pre-clinical model that is used by leaders up and down the chain of command.

Operational and occupational demands for military medical personnel are dramatically different today. Caregivers often deploy as IA's and typically miss the restorative dwell time between deployments as combat units typically execute. Consequences of untreated cumulative stress can result in physical complaints, changes in eating or sleeping habits, and an increase number in medical errors or near misses. In addition, there is evidence that suggest Navy Medical personnel are not meeting their own mental health needs or using existing mental health resources before serious consequences occur to themselves or to others.

The Navy Medicine Caregiver OSC (CgOSC) program is one of DOD's resilience initiative and works under the three fundamental principles of early recognition, peer intervention, and connection with services as needed. One of the main strategies for addressing the psychological health needs of caregivers is through COSFA and intervention strategies. Core knowledge and skills include:

- Stress Continuum Model
- Occupational Stress First Aid
- Buddy care assessment and intervention
- Self-care/compassion fatigue skills
- Work environment assessment
- Education outreach/train the trainer.

(*Note: this is directly out of the NTPP 1-15M/MCRP 6-11, COSC Doctrine)

In September 2011, eighteen NHCL and seven 2nd Marine Division personnel attended a CgOSC/COSC/COSFA Train-the-Trainer course conducted by Commanders Jean Fisak and Sean Convoy, Master COSFA Trainers. Locally, there are both blue side and green side teams in place who are responsible for deploying COSC and COSFA. The NHCL CgOSC Team is readily available for training and command consultation for Navy assets. Lt. Amber Scott is available for training and command consultation for Marine Corps assets and can be reached at (910) 450-8598 or amber.scott@usmc.mil.

HOSPITAL ROUNDS



Santa and Mrs. Claus were spotted in the hospital passageways as they made their final check to see which staff members had been naughty or nice.

Ahh!, to be a child again. This little girl walks away from the Christmas tree after selecting a teddy bear . The were delivered to NHCL by Rolling Thunder, (local motorcycle club), during their annual (Care Bear Run).

NHCL Culinary Specialists and their family members lend a helping hand to the Salvation Army during the holiday season.

Photo by: CS1 Terrance Farrior: (L-R from back row) CS2 Victor Silas, CS2 James Wilcox, CS1 Terrence Farrior, Next row - Lawrence Robinson, CS3 Geneva Wilson, CSC Stanley Nickeo, CS Tam Nguyen, In front - Amione Wilson, and CS Scherelle

HAPPY NEW YEAR!

FRG Holiday Hayride

By Lt. Cmdr. Tim Drill

Over 60 Naval Hospital Staff, family members, and friends shared a hayride with Santa Claus at Mike's Farm Dec. 9, sponsored by our Family Readiness Group (FRG). Boasting a "Kids Serve Too" banner, attendees were treated to a lighted trail filled with Christmas displays, music and song.

The FRG is committed to morale, welfare, and family support for deployed members of the naval Hospital. Check us out on Facebook or contact us at frgnhcl@gmail.com for volunteer opportunities.



Give the Gift that Saves Lives

By HM1 (FMF) Erik Torres

The Armed Services Blood Program (ASBP) has a proud history of providing quality blood products for Service members and their families in both peace and wartime. Since its inception over 50 years ago, the ASBP has collected nearly 5,000,000 units of blood to support United States military members. This would not have been possible without the support of dedicated staff and generous donors within the military community. Blood donated to the ASBP by active duty personnel, government employees, military retirees, and military family members has saved the lives of fellow military community members in their time of need. Our nation's military has come to depend on the ASBP to provide a sustained, secure and safe blood supply across the country and around the world at all times.

The Armed Services Blood Program (ASBP) plays a key role in providing quality blood products for Service members and their families in both peace and war. As a joint operation among the military services (Army, Navy, Air Force), the ASBP has many components working together to collect, process, store, distribute, and transfuse blood worldwide.

Currently, the Armed Services Blood Program (ASBP) operates 22 blood donor centers and 81 transfusion centers in the U.S., Europe and Asia. Two Armed Services Whole Blood Processing Laboratories serve as storage and shipping facilities for contingency blood—both liquid and frozen. A network of Blood Transshipment Centers, Expeditionary Blood . For more information about the ASBP contact HM1 Erik Torres at 450-4628



Competition Increases Donor Turn-out

By HM1 (FMF) Erik Torres

To accept or undertake a challenging task may be a very difficult decision, especially the challenge given to the First Class Petty Officer Association (FCPOA) and Junior Enlisted Association (JEA) on December 13, 2011. The FCPOA and JEA were asked to participate in the first semi-annual “Support Our Troops Blood Challenge”, in the effort to increase the participation of blood donor's during Naval Hospital Camp Lejeune blood drives. It has become a very daunting task to recruit blood donors during the holiday season and through-out the year, so when the idea of this challenge was presented to HM2 Tara Bonilla and HM1 Thomas Peterson they accepted it with enthusiasm. HM2 Bonilla, a regular platelet donor with the blood donor center stated “I understand the importance of the donor centers mission and I will help anyway I can during this challenge.”

The time and effort put into this challenge was displayed during the scheduled hospital blood drive for this event. Over fifty donor's were registered on December 13th, a recognizable increase from previous hospital blood drives. Although the JEA was recognized as the overall highest blood donor contributors, members from the FCPOA such as HM1 Jason Houchins felt a sense of pride for their contributions to this event. HM1 Houchins has deployed several times during his career and understands the importance of this program. Houchins is the commands' lead instructor for the Tactical Combat Casualty Care Course. “I have seen this blood in use and know the importance it plays in saving lives,” said Houchins.

The Junior Enlisted Association was presented the first semi-annual “Support Our Troops Blood Challenge Award” on December 19, 2011. It is hoped that the competitive spirit among staff members will result in increased participation in future blood drives .

Don't Let Your New Year's Resolutions Slip Away!



By: Stacy M. Lamb RHEd
Health Educator
Naval Hospital Health Promotion and Wellness

As the first few months of the New Year start to slip away...do you find your New Year's resolutions slipping with them? Resolutions should be realistic, reasonably attainable, and manageable. Try focusing on setting short-term, mid-term, and long-term goals taking "small steps" to reach your ultimate goals! Strive to make lifestyle modifications and behavioral changes that you feel comfortable with and that you can maintain for the rest of your life.

Taking small steps is important when trying to set any healthy resolution. Simply establishing goals to make healthier choices and lead a healthier lifestyle should make you feel good about yourself. To succeed, set small goals you know you can reach daily. Attaining small goals in short periods of time, will give you immediate feelings of success and gratification.

Small, distinct behavior changes are easier to stick too, than vague goals, like "I will lose 10lbs." If your resolution is not clear or is too large, add a plan of action, with shorter, smaller steps to attain the larger goal. Rather than making a resolution like, "I will exercise more," try "I will start walking every Monday, Wednesday, and Friday on my lunch break for 30 minutes." This way, you will feel a sense of accomplishment and if you miss a day, you can get right back on track.

Any goals you set should come from a sincere, desire to change yourself! Research has shown that negative feelings are a frequent cause of relapse in behavior-change programs, and resolutions that feel like punishment can cause negative feelings. All resolutions should be positive changes that will help you reach and maintain your goals for life. Don't decide to make changes for anyone other than yourself. And remember, "Resolutions are an opportunity to look forward in a positive way, rather than to punish yourself for past behaviors." (2009 American Council on Exercise)

Get excited and creative when making a plan for change! Maybe you have a goal to meet new friends with similar behavior interests; you may want to try taking group fitness classes to meet new people and to keep your new healthy behavior fun and interesting. Perhaps you have a goal to spend more time with your family. You may want to start taking afternoon walks with your children or another family member.

Know and expect to hit "road blocks" on your journey! Anticipating that your plan is not always going to work out perfectly will help with taking "alternate routes" to keep you on track. If things like bad weather or a cold prevent you from sticking with your plan, make alternate plans for situations that you can not escape.

Make sure you surround yourself with a strong support system on a regular basis. This will help keep you accountable, motivated and positive. It may help you reinforce your goal if you have support from a role model who already lives the lifestyle you are trying to achieve. If they can do it, so can you! It is easier to stick with your plan if you feel good about yourself. Remember, "the only way your goal is going to become reality is if you believe in it and, most of all, if you believe in yourself (2009 American Council on Exercise)."

Whether it's quitting tobacco, losing a few pounds, exercising, eating healthier, or just learning new healthy lifestyles behaviors the Naval Hospital Health Promotion and Wellness Department has an array of preventive and intervention programs to assist you accomplishing your New Year's Resolutions. We are located in building (Bldg) 4 located directly across the street from the Base Theater on the corner of McHugh Blvd. and Post Lane. For more information or register for a class, just stop into Bldg 4 or call (910) 451-3712